



3671 Taylor Road
P.O. Box 45
Loomis, CA 95650-0045

EMPLOYMENT APPLICATION

SOUTH PLACER MUNICIPAL UTILITY DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER.

POSITION APPLIED FOR: _____ DATE _____

I have read the job description and understand the job duties for the position. ☐ Yes ☐ No

Members of immediate family of current employees will not be considered for employment.

PERSONAL INFORMATION

Name: _____ Phone () _____
last first middle

Address: _____ Years _____ Months _____
number street city state zip

Soc. Sec. No. \ \ Driver License No. _____ State _____ Class _____

The District will require proof of a valid California Driver's License, and will require a current DMV printout to verify driving record from each applicant.

GENERAL INFORMATION

1. Date you would be available for work: _____ Salary Desired: _____

2. Are you currently employed? ☐ Yes ☐ No

3. If employed, may we contact your supervisor? (if so, please name, incl. phone no.) ☐ Yes ☐ No

4. Do you have transportation to and from work? ☐ Yes ☐ No

5. Can you perform the duties of the job description without accommodation? ☐ Yes ☐ No

If no, what can be done to reasonably accommodate your condition? _____

Note: Applicants will be required to pass a post-offer physical examination and drug screening. The successful applicant will also be subject to a criminal background check.

6. Have you been convicted of a felony? (conviction will not necessarily disqualify an applicant) ☐ Yes ☐ No
If yes, please explain _____

7. Have you ever failed a pre-employment drug screening test? ☐ Yes ☐ No
If yes, please explain _____

Note: For safety sensitive positions, the District will contact previous employers of new hires to obtain drug and alcohol history in conformance with Part 40.25, Title 49, Code of Federal Regulations.

8. Spare time activities/hobbies _____

9. In case of an emergency notify _____
name address phone number

EDUCATION

NAME AND LOCATION	DID YOU GRADUATE?	SUBJECTS STUDIED
High School: _____		
College: _____		
Trade, Business or Correspondence Schools: _____		
In addition to your work history, what other skills, qualifications, special training, and/or certificates would especially fit you for your work with our District? _____		

Have you ever had any job-related training in the U.S. Military?..... <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain : _____ _____

WORK EXPERIENCE (List most current job first)

Date Month and Year	Name, Address, Phone No. of Employer	Salary	Position	Reason for Leaving
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				

PROFESSIONAL REFERENCES (Individuals who can speak to your work experience)

Name	Address	Business	Years Aquatinted
1.			
2.			
3.			

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS SUBJECT TO A PROBATIONARY PERIOD, DURING WHICH TIME SAID EMPLOYMENT MAY BE TERMINATED AT ANY TIME WITH OR WITHOUT CAUSE AND WITHOUT NOTICE.	
Date : _____	Signature : _____

DO NOT WRITE BELOW THIS LINE

Interview Date: _____ By: _____ (Interviewer to Attach Comments)

Hire Date: _____ Position: _____ Report Date: _____ Salary/Wages: _____

Recommended for Hire By: _____ Approved By: _____